

County: Waupaca
 MANAWA COMMUNITY NURSING CENTER, INC.
 400 EAST 4TH

Facility ID: 4330

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MANAWA 54949 Phone: (920) 596-2566
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/01): 57
 Total Licensed Bed Capacity (12/31/01): 64
 Number of Residents on 12/31/01: 50

Ownership:
 Highest Level License:
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 48

Corporation
 Skilled
 No
 Yes
 Yes
 48

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		36.0
Supp. Home Care-Personal Care	No					1 - 4 Years		38.0
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	8.0	More Than 4 Years		26.0
Day Services	No	Mental Illness (Org./Psy)	4.0	65 - 74	12.0			-----
Respite Care	Yes	Mental Illness (Other)	4.0	75 - 84	34.0			100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	40.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	6.0	Full-Time Equivalent		
Congregate Meals	Yes	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	8.0		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	42.0	65 & Over	92.0	-----		
Transportation	No	Cerebrovascular	14.0		-----	RNs		10.5
Referral Service	No	Diabetes	10.0	Sex	%	LPNs		7.2
Other Services	Yes	Respiratory	2.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	16.0	Male	28.0	Aides, & Orderlies		
Mentally Ill	No		-----	Female	72.0			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care		Managed Care			Total Resi - dents	% Of All	
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)				
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	4	100.0	301	31	81.6	97	0	0.0	0	7	87.5	125	0	0.0	0	0	0.0	42	84.0
Intermediate	---	---	---	7	18.4	80	0	0.0	0	1	12.5	100	0	0.0	0	0	0.0	8	16.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	4	100.0		38	100.0		0	0.0		8	100.0		0	0.0		0	0.0	50	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	13.7	Daily Living (ADL)	Independent			
Private Home/With Home Health	2.0	Bathing	0.0	86.0	14.0	50
Other Nursing Homes	7.8	Dressing	20.0	66.0	14.0	50
Acute Care Hospitals	70.6	Transferring	38.0	48.0	14.0	50
Psych. Hosp. -MR/DD Facilities	3.9	Toilet Use	40.0	46.0	14.0	50
Rehabilitation Hospitals	0.0	Eating	86.0	4.0	10.0	50
Other Locations	2.0	*****				
Total Number of Admissions	51	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	10.0	Receiving Respiratory Care		6.0
Private Home/No Home Health	30.2	Occ/Freq. Incontinent of Bladder	32.0	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	24.0	Receiving Suctioning		0.0
Other Nursing Homes	22.6			Receiving Ostomy Care		2.0
Acute Care Hospitals	9.4	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp. -MR/DD Facilities	1.9	Physically Restrained	2.0	Receiving Mechanically Altered Diets		20.0
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care		Other Resident Characteristics		
Deaths	35.8	With Pressure Sores	0.0	Have Advance Directives		100.0
Total Number of Discharges (Including Deaths)	53	With Rashes	0.0	Medications		
				Receiving Psychoactive Drugs		14.0

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Peer Group Ratio	Bed Size: 50-99 Peer Group Ratio	Licensure: Skilled Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	75.0	82.5 0.91	86.4 0.87	85.8 0.87	84.6	0.89
Current Residents from In-County	96.0	74.3 1.29	69.6 1.38	69.4 1.38	77.0	1.25
Admissions from In-County, Still Residing	33.3	19.8 1.68	19.9 1.68	23.1 1.44	20.8	1.60
Admissions/Average Daily Census	106.3	148.2 0.72	133.4 0.80	105.6 1.01	128.9	0.82
Discharges/Average Daily Census	110.4	146.6 0.75	132.0 0.84	105.9 1.04	130.0	0.85
Discharges To Private Residence/Average Daily Census	33.3	58.2 0.57	49.7 0.67	38.5 0.87	52.8	0.63
Residents Receiving Skilled Care	84.0	92.6 0.91	90.0 0.93	89.9 0.93	85.3	0.98
Residents Aged 65 and Older	92.0	95.1 0.97	94.7 0.97	93.3 0.99	87.5	1.05
Title 19 (Medicaid) Funded Residents	76.0	66.0 1.15	68.8 1.10	69.9 1.09	68.7	1.11
Private Pay Funded Residents	16.0	22.2 0.72	23.6 0.68	22.2 0.72	22.0	0.73
Developmentally Disabled Residents	0.0	0.8 0.00	1.0 0.00	0.8 0.00	7.6	0.00
Mentally Ill Residents	8.0	31.4 0.25	36.3 0.22	38.5 0.21	33.8	0.24
General Medical Service Residents	16.0	23.8 0.67	21.1 0.76	21.2 0.75	19.4	0.82
Impaired ADL (Mean)	38.8	46.9 0.83	47.1 0.82	46.4 0.84	49.3	0.79
Psychological Problems	14.0	47.2 0.30	49.5 0.28	52.6 0.27	51.9	0.27
Nursing Care Required (Mean)	3.5	6.7 0.53	6.7 0.52	7.4 0.47	7.3	0.48